IN THE SPECIFICATION:

Please amend the specification as follows:

On page 1, lines 10-18, please replace the following paragraph:

Without being bound by any particular theory, recent studies in ophthalmology suggest that presbyopia that arises almost universally among people in their 40s is the result of the continued growth of the lens. Lens growth results in shortening the length between the lens and ciliary muscles. This compromises the ability of the ciliary muscles to effectively stretch the lens. This is exhibited as a reduced amplitude of accommodation. ~~The increasing~~ Increasing the effective working distance between the ciliary muscles and the lens equator is effected by increasing the diameter of the sclera in the region of the ciliary body. This theory is not confirmed and other or additional factors may obtain.

On page 6, line 11-12, please replace the following paragraph:

Figs. 4(a) and ~~5~~ 4(b) are respectively top and side views of another embodiment of the scleral stent of the invention;

On page 8, lines 10 – 20, please replace the following paragraph:

Stents of this invention are dimensioned from about 2 mm to about 6 mm, in

length with particular reference to about 4.75 to about 5 mm. In particular embodiments the stents are tapered from the sides with a narrow end of about 550 microns to about 650 microns and a wide end of about 600 to about 850 microns adjoining a flange of about 1000 to about 15 hundred microns with particular reference to about 1200 microns. Stents with the long axis generally describing ~~and~~ an arc are noted with a radii at the upper surface of from about 3 to about 10 mm with particular reference to about 4.0 to about 4.7 mm and particularly about 4.4 mm. Stents with the long axis generally describing ~~and~~ an arc are noted with a radii at the lower surface of from about 3 to about 15 mm with particular reference to about 7 to about 10 mm and particularly about 8.8 mm.

On page 11, lines 6 – 10, replace the following paragraph:

Consider an embodiment with a flange width of 1200 microns, and a total height (from the arc length plus the flange height) of 862 microns. To increase tenting another 100 microns and maintain the same orientation-stability the flange width is increased to 1339 microns. That is, the ratio of Flange ~~to~~ Width to maximum height is held constant (*e.g.* 1200/862 and 1339/962).

On page 11, lines 13 – 20, replace the following paragraph:

In some embodiments sutures are be applied, particularly at the extremes of the wide footprint, so as to avoid slipping. In the embodiment of Fig. 8, sutures are applied to maintain contact of the flange to the sclera. When sutured, the bottom of the wide flange will tend to support the on-axis component of the net load and the sutures will only have to support any cross-axis component of force. Only if the net-force is applied beyond the critical angle ~~it~~ is it necessary for

sutures to support any off-axis component of the load to prevent rotation. A wide flange will tend to reduce the force exerted on the sutures.

On page 11, beginning at line 21 through page 12, line 9, replace the following paragraph:

Fig. 11 is a view of the ocular globe (200)_with intrasclerally implanted devices. The outer layer of the eye is the sclera (202) and the external muscles (218). The cornea (214) is the most anterior structure with the pupil (224) seen behind and central thereto. The limbus (216) is the junction of sclera (202) and cornea (214). Tunnels (220) in the sclera are seen with anterior margins (222) about 4 to 5 millimeters posterior to the limbus (216). Each tunnel (220) contains the stent ~~(204)~~ having the front end ~~(207)~~ (204) protruding from one end thereof and a flange (206) protruding from the other end. The body (205) of the stent positioned within the tunnel is shown in phantom. The stent is oriented with its protruding front end ~~(207)~~ (204) and flange (206) resting on the sclera and its arcuate peak ~~(205)~~ within the tunnel.